PTO/SB/30 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE vork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## Request For Continued Examination (RCE) **Transmittal**

Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Application Number	09/429,832
Filing Date	October 29, 1999
First Named Inventor	Ramesh A. Bhat
Art Unit	1646
Examiner Name	N. Basi
Attorney Docket No.	00646/100D205-US1 .

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

amendments encl	uired under 37 CFR 1.114 Note: If the RO osed with the RCE will be entered in the order in wish to have any previously filed unentered an	n which they wer	re filed unless applica	ant instructs otherwise. If		
	sly submitted. If a final Office action is out considered as a submission even if this be			after the final Office action		
i. Cor	i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on					
ii. 🔛 Oth	er					
b. x Enclose	d					
i. X Am	endment/Reply iii.	Information D	Disclosure Stateme	ent (IDS)		
ii. Affi	davit(s)/Declaration(s) iv.	Other				
2. Miscellaneous						
a. Súspen	sion of action on the above-identified appli	cation is reque	ested under 37 CF	R 1.103(c) for a		
period o	of months. (Period of suspensi	on shall not exce	eed 3 months; Fee u	nder 37 CFR 1.17(i) required)		
b. Other						
3. Fees The RC	E fee under 37 CFR 1.17(e) is required by 3	7 CFR 1.114 wh	hen the RCE is filed			
a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to						
Deposit Account No.						
i. X RCI	E fee required under 37 CFR 1.17(e)					
ii. Extension of time fee (37 CFR 1.136 and 1.17)						
iii. Oth	·					
b. X Check i	n the amount of \$ 770.00	enclos	sed			
c. Payment by credit card (Form PTO-2038 enclosed)						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
Name (Print/Type)	Kristin E. Behrendt	Registration N	No. (Attorney/Agent)	45,599		
Signature	Kristin Belnedt		Date Dec. 2	2,2003		

	<del></del>		 
Express Mail Label No.	Dated:	12-22-03	
EV34006	37 on US	· · · · · · · · · · · · · · · · · · ·	 

2 2 200 E					A	pproved for u	F se through 7/31/2006.	TO/SB/17 (10-03) OMB 0651-0032	
Under the Paperwork Reduction Act of 1995, no persons are	require	ed to resp	ل cond to	I.S. Pate a collec	ent and Trad	emark Office;	U.S. DEPARTMENT	OF COMMERCE	
FEETRANSMITTAL A				Complete if Known					
FEE IRANSWILLIAL	ļ	Applic	ation	Numbe	er	09/429,832			
for FY 2004		Filing Date			October 29, 1999				
Effective 10/01/2003, Patent fees are subject to annual revision.		First Named Inventor			Ramesh A. Bhat				
Enderto Total Zood, Fateri 1000 are dalgot to arribat Persion.	Examiner Name				N. Basi				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit				1646				
TOTAL AMOUNT OF PAYMENT (\$) 770.00				00646/100D205-US1					
METHOD OF PAYMENT (check all that apply)	FEE CALCU			CALCUL	LATION (continued)				
X Check Credit Money Order Other None	3. A	DDITIO	ONAL	FEES					
Deposit Account:	Large	Entity	Small	Entity					
Deposit Account 04-0100	Fee	Fee	Fee	Fee	•	Fee Desc	ription		
Number	Code	(\$)	Code	(\$)				Fee Paid	
Account Darby & Darby P.C.	1051	130	2051	65	-	- late filing fee			
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge - sheet.	- late provisio	nal filing fee or cover	-	
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	h specification	1		
Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a re	equest for ex p	arte reexamination		
	1804	920*	1804	920*		publication of	f SIR prior to		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1 840*	Examiner a Requesting	ction publication of	f SIR after		
FEE CALCULATION	1251	110	2251		Examiner a	ction or reply within			
1. BASIC FILING FEE	1252	420	2252			. •	second month		
Large Entity Small Entity	1253	950	2253			or reply within			
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for	or reply within	fourth month		
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension fo	or reply within	fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Ap	ppeal			
1003 530 2003 265 Plant filing fee	1402	330	2402		-	f in support of	f an appeal		
1004 770 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1403	290 1,510	2403 1451		•	oral hearing	lic use proceeding		
	1452	110	2452	55		evive – unavo			
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665	Petition to r	evive - uninte	ntional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue	fee (or reissu	e)		
Extra Fee from  Claims below Fee Paid	1502	480	2502	240	Design issu	e fee			
Total Claims 17 -20** = x =	1503	640	2503	320	Plant issue	fee			
Independent Claims -3** = X = =	1460	130	1460	130	Petitions to	the Commiss	ioner		
Multiple Dependent	1807	50	1807	50	_	fee under 37	` '''		
Large Entity Small Entity Fee	1806	180	1806	180			n Disclosure Stmt		
Code (\$) Fee Description	8021	40	8021	40	property (tin	nes number o	• • •		
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a sub (37 CFR 1.1		final rejection		
1201 86 2201 43 Independent claims in excess of 3  1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each ac	ditional inven			
1204 86 2204 43 **Reissue independent claims	1801	770	2801	385	•	37CFR 1.129( Continued E	(D)) xamination (RCE)	770.00	
over original patent	1802	900	1802	900		expedited ex	amination		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		fee (spe	i cify)		of a design	аррисацол			
SUBTOTAL (2) (\$)		ced by I	•	ling Fee	Paid	SUBTO	TAL (3) (\$)	770.00	
**or number previously paid, if greater; For Reissues, see above		•							
SUBMITTED BY (Complete (if applicable))					(if applicable))				
Name (Print/Type) Kristin E. Behrendt		ration No ey/Agent)		,599		Telephone	(212) 527-7788	1	
Signature Kristinfelmendt Date Dec 22, 2003					००उ				

Express Mail Label No. <u>£ \1340063700US</u> Dated: \_\_